



Coordinated Community Support Programme: Oldham

**An exploration of professionals' and service-users'
perceptions and experiences of accessing crisis support**

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Executive Summary

In line with the aims of the Coordinated Community Support Programme, this research project aimed to understand access to crisis support, resources and provision to address underlying needs, and the impact of Covid-19 on crisis support. A mixed-methods approach to the research was undertaken, consisting of a quantitative survey for crisis support organisations and qualitative interviews or focus groups with local authority staff, Voluntary Community Sector staff, and service-users. In Oldham 9 individuals responded to the survey and 14 individuals participated in the interviews and/or focus groups.

The survey revealed a varied picture of service provision across Oldham, with most organisations operating across the whole local authority. On average, organisations offered four different types of crisis support; the most common forms of support were advice (particularly supporting applications for grants, housing and welfare advice) and food or food vouchers. The overwhelming majority of those who responded to the survey indicated that there had been an increase in service-use since Covid-19, in comparison to the same period last year.

The interviews highlighted four main themes, which have been summarised below, highlighting the most important aspects in relation to the wider CCS programme:

<p>Defining crisis and crisis support</p>	<ul style="list-style-type: none"> • There was difficulty in establishing a concrete and common definition of crisis. However, there was an agreement that crisis points required urgent and timely support, but that specific crises could vary for individuals. • Given the complexity in defining crisis, crisis support was seen on a spectrum of support. Generally, thresholds for accessing support from the local authority were perceived to be higher than from the VCS, who believed that they could intervene earlier.
<p>Accessing and engaging with crisis support</p>	<ul style="list-style-type: none"> • Access to crisis support was determined somewhat by the capacity within the system. Crisis support was described as a “dam”, which highlighted the increases in demand and limited capacity to meet this demand. • Given the levels of demand there were concerns about staff and volunteer burnout and the sustainability of organisations receiving a high volume of referrals. • Schools and community centres had a strong presence and were perceived by individuals to be trusted places to approach for support, particularly in the absence of knowing where to go for assistance.

	<ul style="list-style-type: none"> • Accessing support was felt to be easier for some groups in comparison to others. There were specific concerns about access for single people and those with no recourse to public funds. • There appeared to be a relative disconnect between knowledge and awareness of crisis support services and service-users feeling eligible or able to access support.
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Co-ordination of services	<ul style="list-style-type: none"> • Within Oldham, there was perceived to be limited multiagency and coordinated working prior to Covid-19. Staff were aware of and worked with other organisations but meaningful coordination between these was somewhat disjointed. Progress had been made recently, particularly in response to Covid-19. • Positive examples of good practice in multiagency working were cited in particular regarding more informal networks that had been built organically between professionals. • Despite the common goal of everyone in crisis support having the same goal of supporting service-users, there were gaps in service provision which led to “inappropriate referrals” that organisations were not equipped to manage. • To improve the coordination of services professionals called for a directory of local advice services in Oldham. The CCS programme is currently working with local partners on this priority.
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Impact of Covid-19 on crisis support provision	<ul style="list-style-type: none"> • For some, Covid-19 had exacerbated previous issues, deepening the lines of inequality in the needs to service-users. For others, Covid-19 led to people experiencing crisis for the first time, suggesting that service-user profile had broadened. There were hopes that this might decrease the historic stigma around accessing crisis support. • There was a significant shift towards the remote delivery of crisis support, which created issues for those with no or restricted access to the internet and digital devices. There were mixed views on telephone service provision, which could cause delays in the provision of support. • Covid-19 was seen to have improved coordination of service delivery between the LA and VCS, and within the VCS as there was more common alignment on what constituted a crisis.
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1. Introduction

A partnership between The Children’s Society, Local Government Association, Trussell Trust, the Church of England, Lloyds Bank Foundation for England and

Wales, and BBC Children in Need is working in partnership with four local authority areas across England and Wales to pilot a coordinated community support programme to better coordinate provision of emergency financial assistance within local areas.

To add to and complement the wider evaluation of the programme, the objective of the current research project is to explore perceptions and experiences of crisis support from the perspectives of local authority (LA) staff, Voluntary and Community Sector (VCS) Organisations, and service-users. Through this objective, the project aims to feed into the overall aims of the Coordinated Community Support (CCS) Programme, which are:

- Improving access to crisis support schemes
- A simpler, supported, application process
- Addressing underlying needs to prevent the recurrence of crisis
- Providing aftercare / Building Trusted Relationships / 'Follow-up'

This research project will support these outcomes by aiming to inform the current status of each of the programme aims. In each of the pilot areas it will seek to understand access to crisis support (including application processes), resources and provisions to address underlying needs and provisions to provide aftercare for those who have needed support.

This research will support our understanding of the local networks of provision that exist to support individuals and families that have or are experiencing crisis. In undertaking this work, we hope to identify the nature of provision and gaps within it in order to inform the wider programme and seek to work with both the LA and the wider VCS to trial innovative solutions to improve the delivery and coordination of support. Furthermore, we hope to draw together programme wide themes from across all the areas in order to understand the common issues (see accompanying report entitled 'An exploration of professionals' and service-user's perceptions and experiences of accessing crisis support: Research in four local authorities in England and Wales).

2. Methodology

The methodology for this project was designed in collaboration with the project Advisory Group¹, consisting of at least one LA and one VCs representative from each of the pilot sites. Members of the advisory group were approached by the CCS team to join based on the breadth of their work. The group comprised of representatives from emergency food providers, the advice sector, and various Local Authority colleagues.

In order to address the aims of the project, a three-pronged approach was implemented, consisting of a local area survey, focus groups with professionals (local authority staff and staff from the VCS), and one-to-one interviews with service-users. These stages are outlined below.

Local area surveys: A survey was developed in consultation with the Advisory Group for distribution amongst the four local authority pilot sites to better understand the range of organisations currently involved in crisis support². This included questions about the organisation, what support they offer, and the average number of clients that they support (see Appendix).

Focus groups with professionals: Focus groups with professionals from statutory and non-statutory organisations in each of the four pilot areas involved in the Coordinated Community Support Programme were conducted. In relation to the aims of the project, the focus groups aimed to explore definitions of 'crisis' and the point of intervention, facilitators and barriers to support provision (including access, referrals, multi-agency working, and addressing underlying needs), any changes since COVID-19 in terms of need and provision, and any areas for improvement and priorities for the future (see Appendix).

Interviews with service-users: In addition to focus groups with statutory and VCS organisations, the advisory group highlighted the importance of engaging with service-users with lived experience of crisis support. Therefore, the research aimed to engage with service-users in each local area, recruited through organisations taking part in the

¹ An initial research proposal was presented to the group without the involvement of service-user interviews, as it was proposed that this could form part of any follow up research. However, the group were all agreed that they would like to service-users involved in this initial piece of work, and therefore the proposal was amended to reflect these changes and feature the voices of service-users in addition to professionals.

² Note: Crisis support was described within the questionnaire's introduction and organisations who self-identified as providing this type of support were eligible to take part.

focus groups and through social media advertisements in the local area. These interviews aimed to better understand how service-users experienced accessing and engaging with crisis support, and the facilitators and barriers within these processes. Service-users were provided with a £20 shopping voucher as a thank you for their participation (see Appendix).

In Oldham, 9 respondents provided responses to the online survey and 14 individuals took part in focus groups and/or one-to-one interviews, across the different participant groups between September – December 2020. A breakdown of interview participant numbers is provided in Figure 1. All focus groups and interviews lasted between 30-90minutes.

All focus groups and interviews were transcribed verbatim and were analysed line-by-line using a semi-structured thematic approach (Braun & Clarke, 2007). All quotes in this report have been anonymised and identified using only the participant group.³

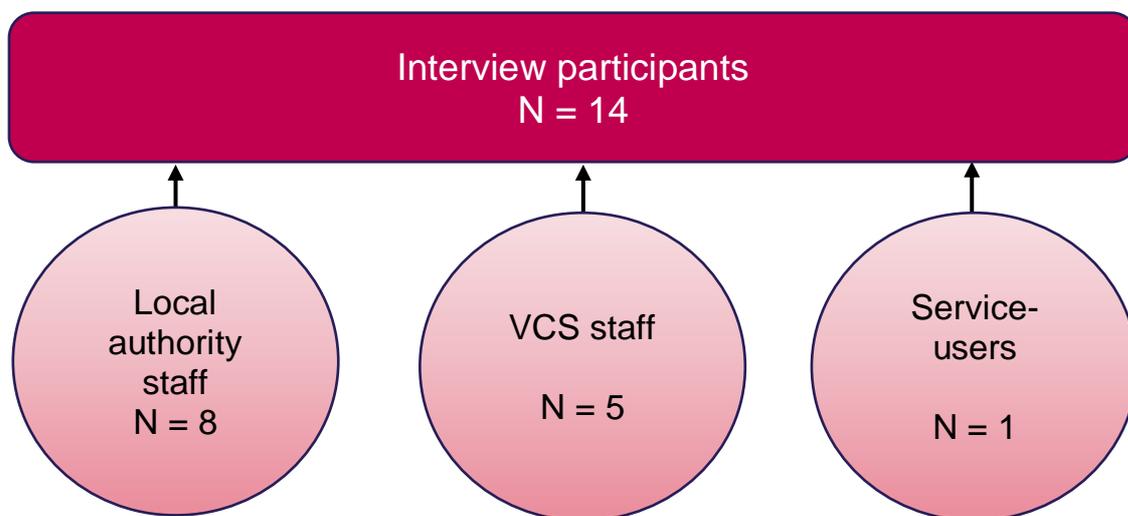


Figure 1. Overview of participant numbers in the qualitative data collection.

³ LA = local authority professional, VCS = VCS professional, SU = service-user with lived experience of accessing crisis support.

3. Findings: Quantitative Survey

There were 9 responses to the survey, provided by organisations that operated in Oldham. Due to the small sample, both the number and percentage of responses has been provided. This data should be interpreted with caution and may not be generalisable to the full scale of crisis support organisations operating across the local authority. The results, however, do provide a picture of the different types of organisations and support offered.

Participants indicated that the organisations within Oldham were quite well-established and had been operational for more than ten years (N = 5, 56%) or five to ten years (N = 4, 44%). Only one respondent indicated that their organisation had been operational for under one year, possibly as a result of the Covid-19 pandemic.

Respondents' organisations provided their services mostly across the whole local authority (N = 6, 67%). There was one respondent (11%) who stated that their organisation worked in only Chadderton North area, another respondent (11%) stated that their organisation worked in eight different areas and one other respondent (11%) indicated that their organisation worked nationally (see Figure 2).

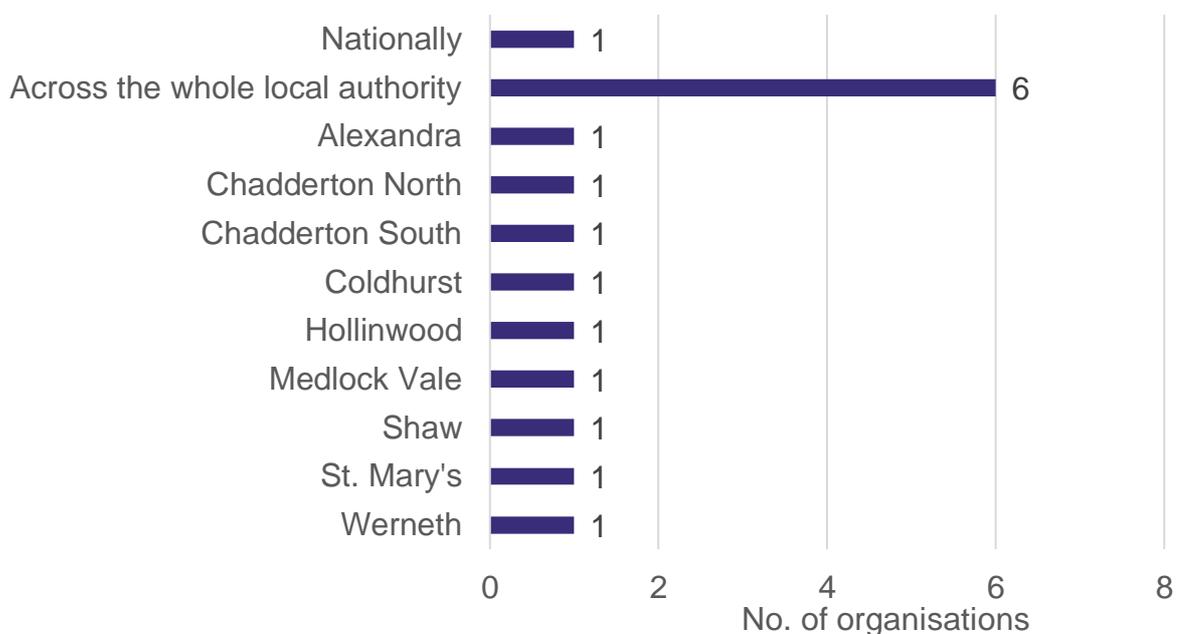


Figure 2. Geographical areas of work across the local authority.

When respondents were asked about the different types of crisis support that they provided, it was found that respondents reported an average of 4 different types of support, highlighting the multi-faceted nature of organisations. The most frequently provided type of support reported within the current sample was advice and/or information (N = 8, 89%), followed by food or food vouchers (N = 6, 67%). See Figure 3.

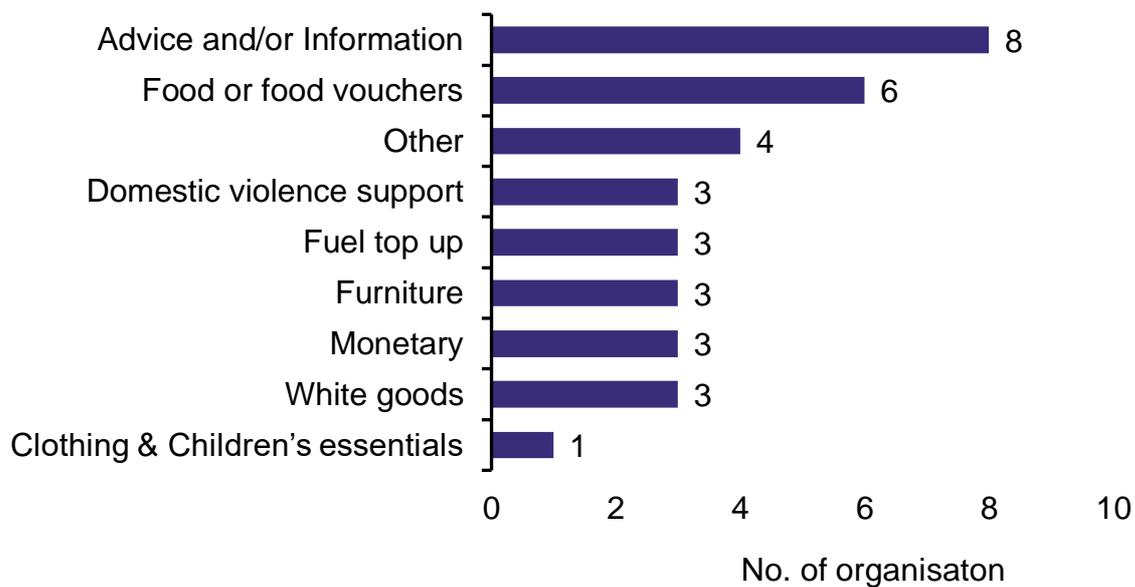


Figure 3. Type of crisis support provided by organisations.

Among the respondents who selected advice and/or information, 75% (N = 6) of them said that they provided service users with support to apply for grants. Other popular advice types that organisations provided were debt advice (N = 5, 63%), housing related advice (N = 5, 63%) and welfare rights advice (N = 5, 63%). See Figure 4.

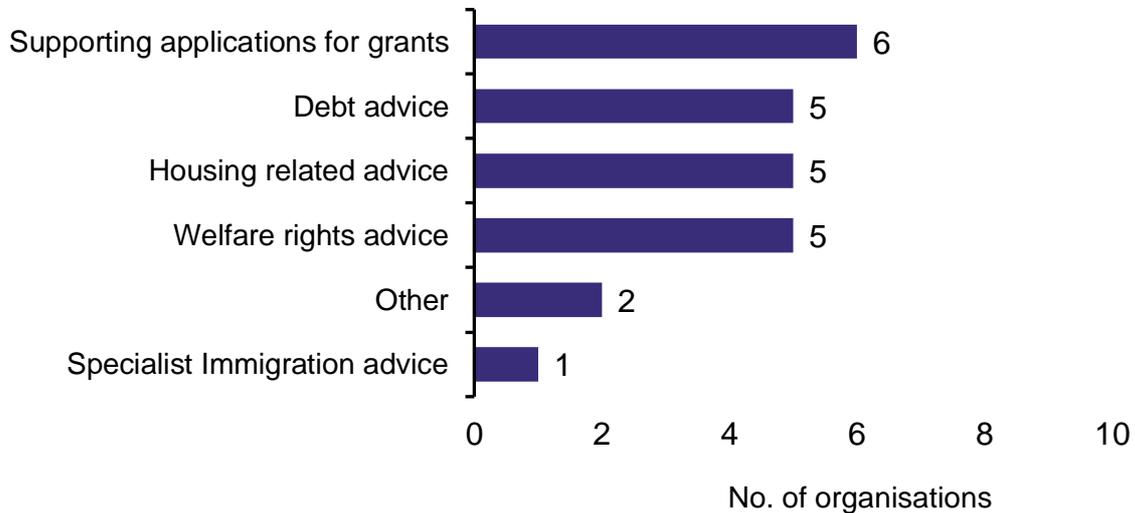


Figure 4. Type of information, advice or guidance provided by organisations.

Each respondent provided the number of people whom their organisation supported since January 2020. They also provided the proportion of service-users that accessed the different types of support as summarized in the table⁴. This information enabled an estimate of the overall numbers of service-users supported by the 18 organisations across the different types of crisis support.

The approximate average number of service users that organisations supported in 2020 was highest for food or food vouchers (~214), which was considerably higher than other types of support. This was consistent with the second most frequently reported service being food banks/vouchers, reported previously. The number of people that organisations supported for help with other type of support (~162) and monetary (~128) were the second and third highest types of support reported. See Appendix for a full breakdown.

It was found that the approximate average number of service users that had received advice or information was highest for welfare rights advice (~157), closely followed by debt advice (~108) and housing related advice (~102). Again, this was largely consistent with the previously reported activities. See Appendix for a full breakdown.

⁴ As a worked example, if an organisation supported 300 service-users and reported that 40-60% were supported with food or food vouchers, then we would multiply 300 by 0.5 (50%) to estimate that the organisation supported approximately 150 individuals with this type of support.

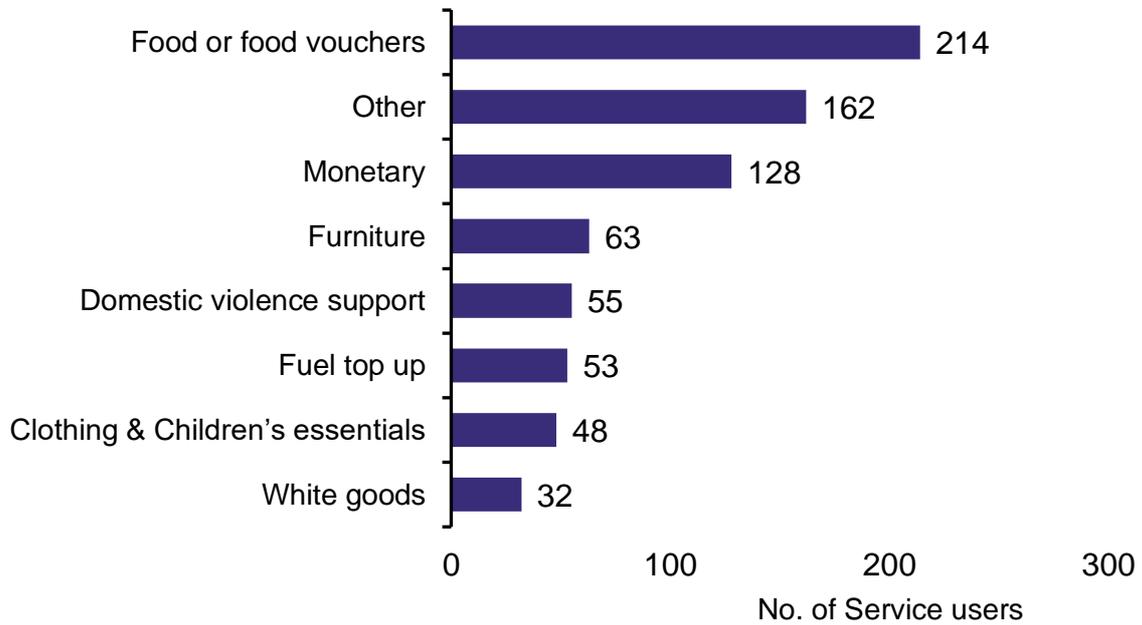


Figure 5. Approximate number of service-users supported for each service across all organisations who responded to the survey.

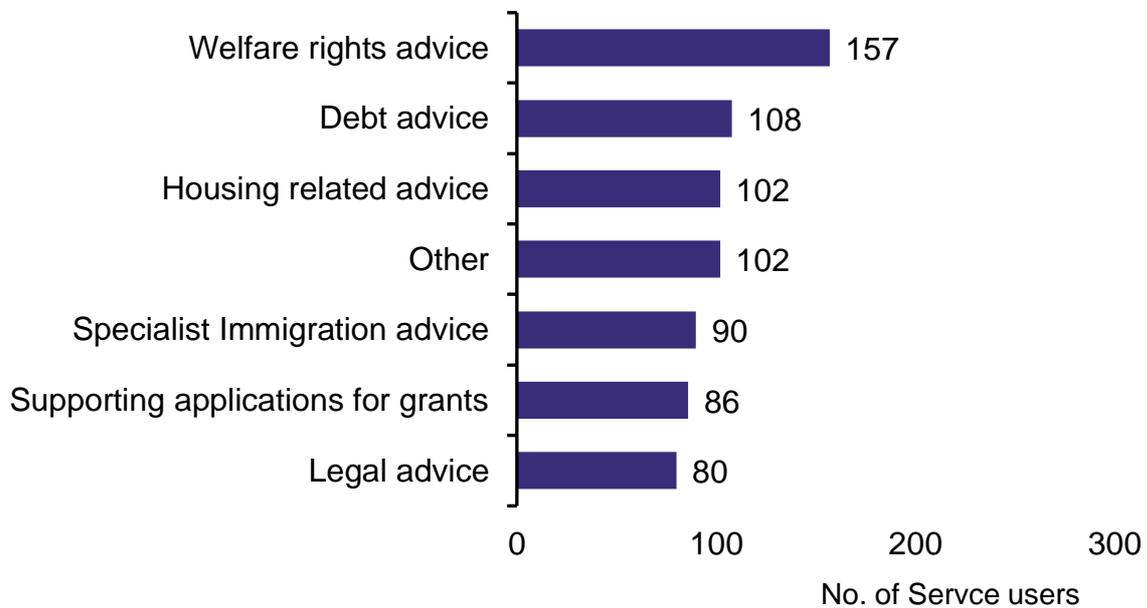


Figure 6. Approximate number of service-users supported for each advice/information type across all organisations who responded to the survey.

Lastly, respondents were asked about their professional perceptions and experiences regarding any changes in the number of service-users that their organisation supported in 2020, in comparison to the same period last year, to better understand the impact of Covid-19 on demand for crisis support services (see Figure 7). Only a minority of respondents reported any reduction in the number of service-users (N = 1, 11%). The overwhelming majority of respondents reported that the number of service-users that their organisation supported in January – September 2020 was significantly or slightly higher (N = 8, 89%). In addition to an increase in overall numbers, organisations also reported that the reasons for contact had changed due to Covid-19, with a particular emphasis on certain services. One respondent had the following comment:

“Because people have had to stay at home the need for furniture and subsistence has increased.”

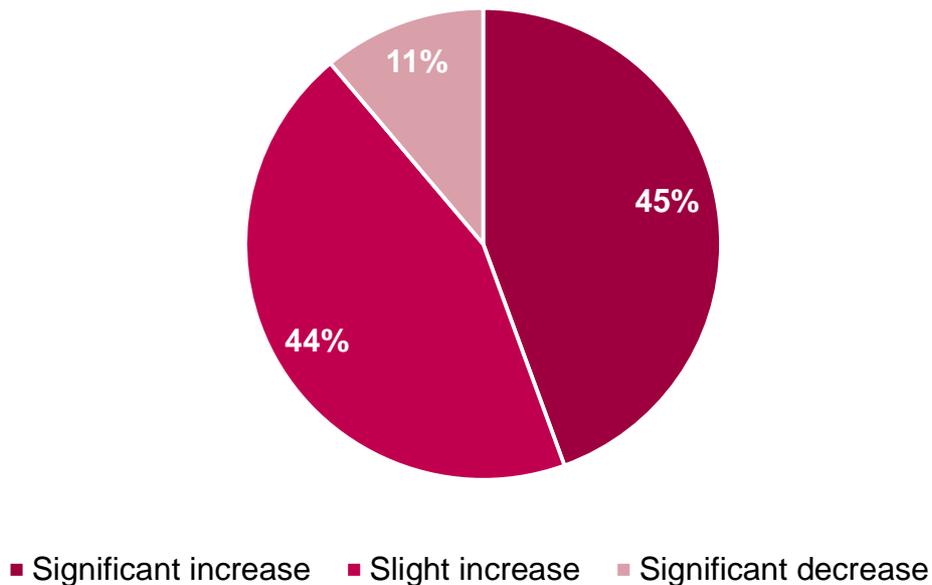


Figure 7. Change in the number of service-users that organisations supported from Jan – Mar 2019 to Jan – Mar 2020.

4. Findings: Qualitative Interviews

There were four main themes highlighted in relation to the research aims. These centered around definitions of crisis support, access and engagement with various types of crisis support and the barriers and facilitators within this, coordinated forms of support for service-users to address underlying needs, and lastly, the impact of Covid-19 on crisis support.

An overview of the main themes are provided in Figure 8.

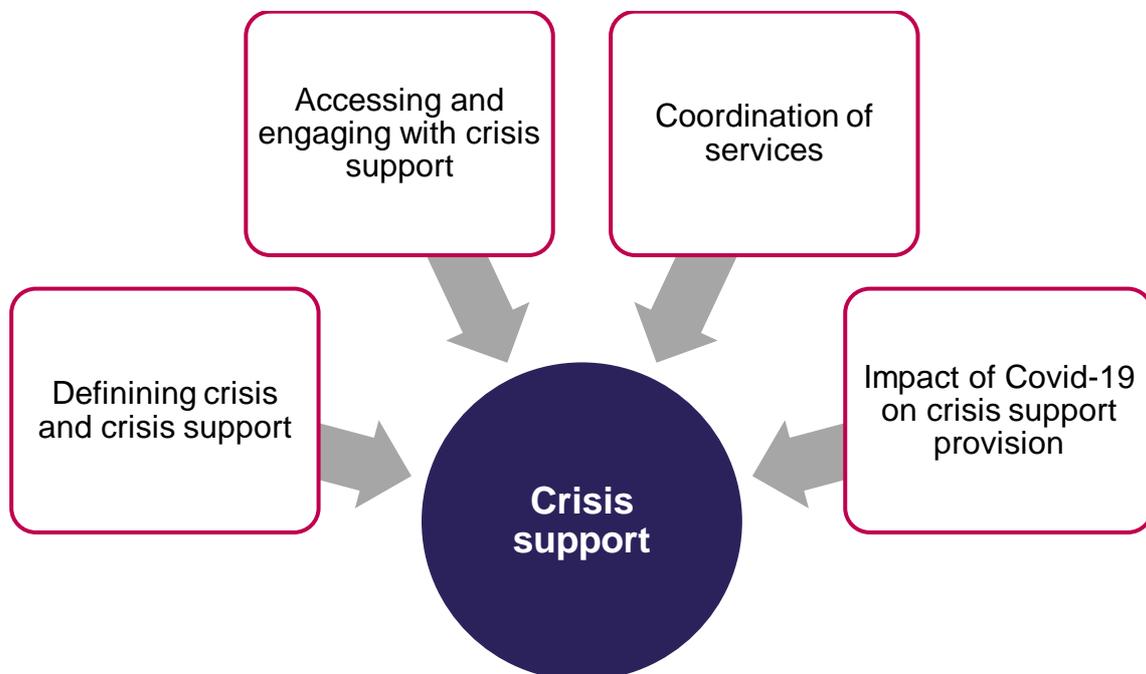


Figure 8. Overview of qualitative themes identified from focus groups and interviews

4.1 Defining crisis and crisis support

The current study sought to explore how different organisations across Oldham defined crisis and crisis support, alongside the point of intervention. Within participants' reflections on the meaning of crisis, it was described how crisis was a complex and individualised phenomenon and they could not "say or define what crisis is because what crisis would be to one person, wouldn't be for another" (VCS). Indeed, it may be that "one person's crisis can be another's 'that's not big deal' sort of thing" (VCS).

In addition to acknowledging the individuality of crisis, professionals reflected that the people experiencing crisis were also individuals, who were people living “*amongst us, living the same life as us but without the means to live that life*” (VCS). This suggests that professionals working in crisis support in Oldham were non-judgemental and remained cognisant that crisis could affect anyone and everyone. This was especially true in relation to recent times:

“There was a lady who was earning a 6-figure salary; she’s now on universal credit. Since the lockdown, she’s used up all her savings, things have happened, and she’s finding herself in that situation. So, there’ll be loads of people like that.” (VCS)

Despite the individual differences in definitions of crisis, there was an overarching consensus regarding points of crisis involving people who needed “*immediate help*” (VCS) and “*immediate relief*” (VCS). One participant provided the following recent example of a service-user in crisis:

“For me the crisis point for many of the people I work with is no food for today or tomorrow. Recently we had a lady who walked from Moston. She walked from Moston up to a certain place where she could get a First bus because she had borrowed that bus pass, and then she came with her son because she has a bad back and she can’t carry the food. And they came. They walked all the way to pick up a few tins of food.” (VCS)

In addition to the immediacy of needs, participants also described how crisis was usually multi-faceted and was almost never an isolated issue. Participants noted that people could generally cope with singular or isolated incidents, but by the time they approached organisations there were usually multiple issues, which promoted professionals to ask themselves, “*how have they managed this far?*” (VCS).

Despite views of crisis centring around immediate help for those experiencing crisis and acknowledging the multifaceted nature of crisis, professionals within both the VCS and within the local authority noted the importance of longer-term support and addressing service-users wider needs as a further aspect of crisis support (as discussed further in Section 4.3):

“I always have in my head people being at a point of crisis and that immediate crisis being quite short term, and then some intervention is put in place to stabilise, and people can hopefully build from there.” (LA)

Taking definitions of crisis support further, the VCS sector expressed coveting a “*standard*” (VCS) definition of crisis, at which point services were required or obligated to step in and help. However, in reality participants across both the LA and VCS reflected that crisis support was most often viewed on a “*spectrum*” (LA) or “*ladder*” (LA) of need. Local authority staff described how their services generally operated on a higher “*threshold of need*” (LA) than VCS organisations, where service-users had to meet a certain threshold of crisis in order to access support through the local authority. There was a view that the VCS generally were frustrated by the local authority’s way of working:

“I think my experience of working with the voluntary sector is that they can be very frustrated about the thresholds that are put in place by statutory services, which sometimes they can see as being arbitrary...Ultimately thresholds can often act as a way of managing resource against demand rather than what we, would like to be able to do for individuals and families, so...I think there’s a bit of tension there sometimes and it’s a very difficult one to manage and balance.”
(LA)

In contrast, participants from various VCS organisations believed that they defined crisis differently and generally had more “*freedom*” (VCS) to define crisis organisation to organisation, but also more freedom to support service-users before they reached the higher levels of thresholds needed by the local authority. Indeed, they saw themselves on the “*front line*” (VCS) in supporting service-users with crisis points. Thus, VCS organisations believed that they could intervene earlier in crises, given their different definitions.

4.2 Accessing and engaging with crisis support

In terms of accessing crisis support, the respondents to the survey and those who took part in interviews and/or focus groups came from organisations cutting across various types of support. This reflects the broad and varied nature of support available locally across Oldham. There were, however, a number of barriers and facilitators noted by participants that affected service-users access and engagement with services. These factors centred around local demand, the remit of support organisations, particular demographic factors of service-users, and psychological perceptions about help-seeking.

Firstly, the sheer demand for crisis support in Oldham was acknowledged by participants working in this field. Participants described organisations’ capabilities as

“ever-more squeezed” (VCS). One participant reflected on their organisations’ ratio between demand and capacity:

“We probably get about a hundred and fifty referrals a month. There’s two of us that deal with them.” (LA)

Consequently, professionals were concerned about the capacity in the system to support existing service-users and pave way to support new service-users. One participant used the notion of a “dam” (VCS) to describe their concerns about increases in capacity and the risk of this damn bursting due to the increasing demand in Oldham, set against a backdrop of funding cuts:

“All these organisations, they’re meeting the need week in, week out for no money. So, they’re going to get burned out and overwhelmed when it gets worse and the cuts get even worse. But there’s got to be a funding pot for emerging need and to sustain these organisations that are doing it week in week out. It’s not fair for them to keep picking up the extra workload. They’re going to get burned out. And then where will these people go?” (VCS)

In spite of these risks of burn-out, participants gave frequent examples of dedicated staff going above and beyond their role in order to provide support to service-users and facilitate access. One example was articulated by a professional working in a foodbank:

“The food bank has been giving people my number over the weekend. I had two cases. One woman called about six times saying, ‘I’m hungry - the food bank didn’t deliver my food and they’ve asked me to call you’. So, fortunately for me, [colleague] was still at the shop. We did a package and went and brought fresh bread and butter and delivered it. This woman was very grateful because they were hungry....There was no way I could ignore that call, even if she’d called at midnight. She sounded desperate.” (VCS)

Within this overcrowded system, participants described particular services or support types that were harder to access, or that served as a gap within the local landscape of crisis support. These needs included specific cavities in provision of carpets and general home decorating services for people moving into new properties:

“I think, for carpets and for decorating people’s houses. Now, when you move into a property and its bare floorboards, there’s nothing there, it’s the worst thing

–, you can't get carpets anywhere in Oldham and you can't get anyone to help you with decorating as well.” (VCS)

Even where there were services to support local need, professionals reflected on the accessibility of support for different populations, including specific groups of service-users where accessing support is generally harder:

“There is another area of single people, because if people have children, children’s services come into help. But those who are single, who don't have a child, don't have nobody, they're really struggling.” (VCS)

“The single people are the ones who get the less benefits. So how can a single person pay the gas, electric, food, and top-ups for the rent on £60 a week? You just can't do it. And then, you know, there's no services for them....Everything's geared for families.” (VCS)

Furthermore, participants also expressed worry for individuals with no resource to public funds; as a group, they *“can't ask anybody for anything” (VCS):*

“I'm particularly thinking around people with no recourse to public funds, because we're talking about statutory services, so for example our service in housing, we can't support people who don't have access to public funds. We can refer and signpost, so in terms of homelessness we can signpost to the [VCS organisations], which is charitably funded. We can support any group in housing except that group, so that is a bit of an omission I suppose and that puts pressure on the charitable sector.” (LA)

In addition to capacity-related and organisational factors, participants described various psychological factors that acted served to facilitate or hinder access or engagement with crisis support services. Perceptions that facilitated access included positive perceptions and knowledge of organisations. For example, professionals described how service-users were most likely to approach organisations that they trusted. Subsequently, often *“the first place” (LA)* a family will approach is their child's school because *“they're going there every day” (LA)* and have a familiarity with the staff.

In contrast, other psychological barriers included perceptions of individuals who seek help. Indeed, these perceptions including views that crisis support was a) only available to certain people or b) not available to them. This suggests, that for some

individuals, there may be a disconnect between knowing that services exist and knowing that they are there to help everyone:

“Although there is food available in food banks, they don't think they are even entitled. Yet, food banks are open to everyone, but they think they're not allowed to have that.” (VCS)

In spite of the barriers that participants described for accessing and engaging with service provision, participants were passionate that crisis support should be equally available to everyone:

“It comes down to policy, doesn't it? We have people here. Surely as a country we've got to say how we're going to help people and create that help.” (VCS)

4.3 Coordination of services

Within definitions of crisis, participants alluded to addressing service-users underlying needs in a more holistic and long-term way, as the ultimate aim within crisis support. One participant articulated this in terms of housing support, where *“people are given a property, but what they want is a home”* (VCS). This suggests that there is more to support than addressing immediate needs, and some service-users' needs extends far beyond this in order to help them, not only alleviate immediate concerns, but to *“thrive”* (VCS). One participant reflected on this:

“People presenting with multiple issues...how do you seek to address and respond to underlying needs. So, signposting referrals, information sharing... We've got real, specialist people in Oldham. But the wider need, we're not going to cover everybody; there's definitely gaps and people in need.” (VCS)

In working together with partner agencies and having a coordinated model of crisis support services, participants felt that they could *“achieve quite a lot”* (VCS) for service-users. In keeping with the example of housing proffered above, participants articulated an ideal support pathway to support service-users once they have accommodation, which may involve the coordination of multiple organisations:

“When someone gets a property, what's the move-on protocol for that? If they're in supported accommodation, they get a property, they then get four weeks' aftercare where they help with housing benefit, look at furniture, white goods, and then refer it on to maybe the early help service. That is a proper pathway.”

Not saying it works every time; it doesn't. But you've got a process that you can follow and identify where the barriers are, where the glitches are." (VCS)

However, perceptions regarding the extent to which this sort of coordinated working happened on the ground varied between organisations and between individuals. Despite the need to organisations to pool together capacity and refer service-users onwards for appropriate support, participants working in VCS organisations portrayed more negative perceptions, describing coordination of services working in Oldham as “*disjointed*” (VCS). Echoing the different definitions of crisis held by LA and VCS organisations, there was a view that VCS organisations offered a “*broader*” (VCS) range of support than statutory provision and were, therefore, felt to be more likely to offer a more holistic form of support. However even within the VCS organisations, some individuals still felt that there was “*no form of joined up working...no handover...no multiagency working*” (VCS).

Case Study: Addressing isolated issues

“We were working with a young, white British man, assigned to our service, and he needed a sleeping bag, and the reason was that he's getting benefits, but he can only afford to pay for his car bills. So, he sleeps in his car. And then somebody stole his sleeping bag. After paying his car tax and the fuel and everything, he can't even afford to buy a sleeping bag, which we got for him for £15, because he didn't have anything. Then somebody broke his car window the back screen of his car, and he just put cling film on. Although we have to buy him winter clothes, we can't afford to repair his car. I forwarded this case urgently to [the local authority]. We're going to try and support him, housing-wise, he's helpless. He can only afford to pay his car bill. He was going for an interview; he didn't even have boots, so we got him boots. Then my colleague took him for the interview, so he's got the job, and he couldn't start because of the boots. So, fortunately, he's going to start but all he needed was £45. Because the boots cost £30, plus the sleeping bag.” (VCS)

Nevertheless, there were positive reflections on some strong multi-agency and coordinated ways of working that had grown organically between some VCS organisations, where professionals “*worked well together*” (VCS). Other participants described local Early Help programmes as a way of encouraging coordinated models of working to address service-users' underlying needs. Whilst these were noted to have good intentions in encouraging organisations to work together, participants also raised challenges in how Early Help operated on a practical level, including the referrals that are sent through the system:

“We get a lot of referrals that are probably not appropriate for early help, because it’s a low- to medium intervention service, and some of the referrals are really complex and intense...and we’re probably not the right service for that person but there is no other service, really. So, early help tends to be a dumping ground, to be honest.” (VCS)

This quote highlights that the coordination of services may be only as effective as the number of and/or capacity of the local organisations to work with service-users: *“it’s a question of what is available”* (VCS). Indeed, the services need to be available to refer service-users onto for the most effective support. However, participants in Oldham highlighted gaps as *“there’s probably not as many organisations involved”* (VCS) in comparison to other local authorities. Participants from the LA suggested that they had lost engagement with some VCS organisations as a result of Covid-19 and changed ways of working.

Thinking more broadly, participants from VCS organisations held wider concerns around limited service provision for more intense support needs. Consequently, service-users were often being referred to onward organisations, who were not equipped to meet their needs. This created a sense of tension, particularly for VCS staff who felt that they were a *“dumping ground”* (VCS) for referrals that were not within their remit:

“Our referrals come from everywhere....Anybody that all those organisations can’t deal with and they’re from a [certain demographic group] they send to us. They’re giving [service-users] false hope that you’re referring to an organisation that can help.” (VCS)

One participant offered an explanation for these types of inappropriate referrals:

“One of the major problems is where those commissioned services are being ever-more squeezed, and they haven’t got the capacity within those commissioned services. The knock-on effect is that some organisations are suddenly starting to receive referrals that really should be dealt with by those commissioned services, by the local authority.” (VCS)

These tensions between VCS organisations and the local authority were repeatedly articulated and resulted in VCS staff *“picking up the pieces”* (VCS) in terms of support. Despite these tensions, participants also expressed gratitude that Oldham had the

number of services that it did, staffed by dedicated, “*caring*” (VCS), and “*passionate*” (VCS) staff.

“I think if there wasn’t early help and there wasn’t [VCS organisation] or [VCS organisation], I really don’t know where these families would have been.” (VCS)

Staff were all aware that these tensions were not the fault of one particular service or organisation; it was “*the system*” (VCS). Ultimately everyone working in crisis support in Oldham “*had a common goal*” (VCS). Consequently, participants called for a “*top down*” (VCS) approach to re-designing the coordination of services in order to increase partnership working and improve the support available to service-users to ensure that they were not encouraging a “*revolving door*” (LA). This included making referral pathways smoother through the use of a coordinated “*form we can all use and take information from, rather than the multiple different forms that we all have*” (LA).

Moreover, any re-design needs to ensure that the right parties are around the table to provide coordinated support to the community. In order to facilitate this, participants noted that it would be useful to have an “*electronic directory*” (LA) that was updated regularly within each community to better understand what support is available (however other participants spoke of a similar system that was already in place). Thus, this suggests that there are smaller, logistical, improvements; but also wider improvements regarding know where the gaps in local service-provision are and filling these gaps. However, both LA and VCS participants expressed a desire to commit to increasing the coordination of services across Oldham:

“It is something we are aware of. There’s lots of fantastic stuff going on across the Council, across our voluntary sector partners. Do we, in all honesty, have those joined up conversations about pulling all together? I don’t think we’ve had the space to, and that’s what we’re trying to create.” (LA)

In addition to challenges around the coordination of support, participants also noted that there were individual differences within service-users that affected the extent to which services could offer extended forms of support that required the involvement of multiple organisations. Indeed, participants described a group of service-users who didn’t appear to want support to address any underlying issues and, instead, only wanted support for the immediate crisis:

“The regular ones [service-users] know that they know they can ring the helpline up and potentially get food, and essential supplies. Even though we try and

offer them other support and ask them to engage with other parties, they're just refusing to or they don't want to...they aren't willing to help themselves or take help and support on." (LA)

Furthermore, there was also reluctance from some service-users to “tick the box” (LA) to consent to organisations sharing their information, in order to facilitate coordinated ways of working with other organisations. This suggests that more can be done to communicate with service-users about the underlying reason for sharing information between organisations and the benefits to consenting to data sharing:

“On our form, our online form, it gives the client the opportunity to agree to giving consent for us to share information, or not, and in the main they tick no. I think it's because they don't really understand fully what that help means, or what data share means, so by the time they get through to the welfare rights team, we have to say, for us to be able to support them we will need to engage with other services, and when we talk that through with them they're quite happy to do that.” (LA)

Whilst participants expressed a great deal of concern for service-users “in the system” (VCS) who were not always having their needs met in a coordinated way, participants spoke with even deeper concern about individuals who were not in contact with any organisation, who were not getting any of their needs met. This suggests that even though multi-agency working was not always viewed as being implemented on the ground in a coordinated way, any support from a certain part of the system (even if this was isolated) was better than no support at all:

“The people who I describe, they are within our system a lot of the time and our system can't support them. So, people who are outside of that system, they've got even less chance.” (VCS)

4.4 Impact of Covid-19 on crisis support provision

Participants reflected on the variable impacts of Covid-19 on crisis support, including on service-users, on organisations, and on multi-agency working within Oldham.

In terms of the impact of service-users' participants noted that individuals were generally still experiencing the same sorts of issues, but Covid-19 had exacerbated issues and brought them to the forefront of people's lives. For example, if people were already experiencing financial difficulties, they didn't have the luxury of purchasing

more expensive products off the shelves or paying more on travel to go to the next supermarket to get essential items that were out of stock. Therefore, their existing difficulties were exacerbated by the circumstances surrounding Covid-19, which created more inequalities. Similarly, one participant reflected on how the service-users that they worked with had been affected by staying at home:

“Our service is always dealing with these issues anyway, because we work with the most vulnerable, marginalized people. However, during this Covid-19 crisis, especially when the best ways of controlling it is staying at home and socially spacing, the people I work with can't do that because some of them don't have a home...and those who do are living under very horrible circumstances. Some are suffering from domestic violence.” (VCS)

In addition to concerns for victims of domestic violence, participants were also worried about increases in mental health issues, children being put at increased risk within the home, and potential exploitation (including issues such as FGM). In particular, VCS organisations noted significant increases in referrals from social care. On the one hand, this was spoken about as a positive as families were being referred on, however it was also worrying that referrals had increased so much over the lockdown months:

“Last month we had a massive influx from social care. I think we had something like 70 referrals from social care. And I asked, how come we've got such a massive sort of huge number of referrals? ...They were saying because social care changed their remit. Instead of an 8-week turnaround where they'd look into referrals, due to COVID they've reduced it. So, they're trying to meet the need rather than having people on a waiting list...giving them support straightaway.” (VCS)

Subsequently, professionals articulated real concern about the circumstances that Covid-19 and caused and/or exacerbated within people's lives. This also extended to the risks people were taking with the virus, and one participant described the dangerous lengths that one service-user went to in order to provide for their family:

“I was shocked somebody came and – we know that they had COVID and somebody saw them. I gave them a call and I said, really, you shouldn't be going out. And then he said there's no way I cannot go out. I am not feeling ill, but I need to work...So, we supported him with a bit of subsistence to stay off work.” (VCS)

As well as exacerbating issues for individuals, Covid-19 had led to an “*increase*” (VCS) and change in the “*different dimensions*” (VCS) of service-users that organisations worked with. As noted in Section 4.2 there had been a perceived increase in service-users who had not experienced crisis before, particularly those who had been “*in work for years*” (VCS) and then had the “*massive shock*” (VCS) of losing their job:

“We are seeing a lot more enquiries, new enquiries, that we haven’t had before, from people who were furloughed, who are wanting advice on employment law, and looking for where they can get financial support, and help to navigate a benefits system that they’ve never had to navigate before. That’s our new client group.” (LA)

“Our referrals have changed from people who are long term unemployed, to people who have just come on to universal credit, and they’ve got six weeks before they get paid, and we’re getting a lot of people like that stuck where they’ve got no finance, they’ve got no gas and electric, and they don’t know where to turn to.” (LA)

Encouragingly, within this new profile of service-users, organisations felt that once the immediate crisis had been addressed and they had been connected to the appropriate support, individuals have the ability, capacity, and confidence to “*support themselves*” (LA). Once again, this was thought to be in contrast to the “*core group*” (LA) of service-users that organisations usually supported, who “*for whatever reason don’t have that confidence, that capacity*” (LA).

Whilst participants were empathetic to everyone experiencing crisis, some did note that with more people experiencing crisis, this had the potential to “*shift the narrative*” (VCS) around crisis support and any associated stigma with seeking help. With more people experiencing crisis points, especially those who never thought they would, participants were optimistic that this could lead to a shared view of the struggles that anyone could experience, irrespective of previous life circumstances. Therefore, a better understanding of other people’s circumstances and reducing the stigma around seeking help was viewed positively by professionals.

Regarding organisational-level changes, Covid-19 both led to increases and decreases in organisations’ capacity to support service-users in crisis; “*some organisations have disappeared, other ones have been created*” (LA). First and foremost, participants described how Covid-19 also completely transformed how services operated, moving from mostly face-to-face work with service-users to

primarily online or remote working. Participants described how “*digital has come into its own*” (VCS) in facilitating access at time where no face-to-face contact could occur. Despite this, organisations faced numerous challenges in continuing to provide a service and always wanted to “*make it work*” (VCS) and “*meet the needs*” (VCS) of the service-users that they supported, within the remit of the government guidelines. However, there were undeniable challenges within this, which reduced service’s capacity:

“The level of support dwindled for a variety of reason; lockdown, home working, people who may have been isolated, may have been ill themselves and unable to work. Some of those services put in place things in terms of remote support but that took a bit of time to get in place...the reality is that there’s only so much you can do in those circumstances speaking to somebody over the computer, assuming somebody has a computer to speak to you over.. the level and quality of support for some people by default wasn’t what it would have been if they’d have been talking to somebody face to face.” (LA)

Against the backdrop of these challenges, there was a view that not all services had struck the right balance between supporting service-users and coping with the effects of Covid-19 and staff working remotely. Participants relayed both personal stories and stories from service-users about the difficulties in contacting certain organisations for support. For example, they could ring a service directly, but the wait times were lengthy and there was no way to leave a message if the service did not answer. Professionals themselves were frustrated with these services, but noted that this frustration would be worse for service-users:

“For people who’ve not got a lot of credit on their phones, they’ve got to go through that. At the end of it you’re just going to get doxed off, because there is no facility to leave a message here. So, they’ve gone through, they’ve waited, they’ve had the COVID message, and they get bummed off. So I did that. And then we went to somebody else and then somebody else. Just trying to get in touch with someone who can give you information was just ridiculous.” (VCS)

Other organisations did have a voicemail or message-leaving facility set up on their phone lines however they still worried that they were losing people who were in desperate need of support:

“I think we’ve lost up to now about eighty-five callers. That worries me because where have they gone for help, did they ring somebody else, did they get that

support, or do they think that some of them think they've left enough information that we can contact them?" (LA)

Participants also raised examples of services reducing their availability or support for service users. This included reduced working of the Department for Work and Pensions, who stopped their assessments for a period during the lockdown, which impacted upon access for service-users:

"There are a lot of things that DWP weren't doing at the time, so the medical assessments had stopped and the way they were operating had changed, so we lost some momentum with some of our core group so we've got clients still waiting for decisions on mandatory considerations, but because everything went on hold, they're still waiting to come through." (LA)

Further to large-scale Government led services reducing their access, there were also concerns about smaller, local, grass roots, types of support services. In the first few months of lockdown, participants described these types of organisations being unable to operate. The phrase *"mothballed, metaphorically mothballed"* (LA) was used to describe these changes. As such, professionals worried about whether or not these types of services would re-emerge post-Covid. A participant reflected on these concerns:

"A lot of people in need in Oldham, their predominant support within the community sector is a very local group, it's the men's group at one of our community centres that has about seven guys turn up to it, but whom actually it's a social lifeline. It's that scale of activity and that's run by one bloke...that's the bit where it feels it's gone missing and a lot of it isn't back yet and a lot of it may not come back." (VCS)

Despite the challenges, Covid-19 also facilitated increased access and capacity in some cases. Indeed, there was a general view that professionals in this sector had *"really stepped up"* (VCS) to go *"far and above"* (VCS) and *"out of [their] way"* (VCS) to support service-users in these difficult times. Specifically, participants from VCS organisations expressed a view that Covid-19 had reduced the *"red-tape"* (NCB) and bureaucracy within local authorities, in a way that allowed them to operate much more like *"VCSE organisations"* (VCS) with lower thresholds of crisis. This suggests that these new ways of working meant that local authority and VCS crisis support was much more aligned in how they defined crisis, which meant that *"anybody who needed support got it"* (VCS).

Similarly, participants described organisations that had successfully expanded their remit in order to offer more support to an increased number of people:

“A very fast growing grass roots community response in terms of mutual aid. Sometimes focused around existing community organisations, so in one area we’ve got a WI group who mobilised very quickly and were going picking up prescriptions for people... or in other areas groups formed from scratch often on social media and largely based around people who due to lockdown weren’t working.” (LA)

Lastly, in terms of the impact on multiagency working, Covid-19 was viewed as shining a light on need for organisations to work together in a more “coordinated” (VCS) way and acting as a “neighbourhood model serving people” (VCS). Participants reflected that there had been “a lot more” (VCS) multi-agency working since the onset of Covid-19, and many specifically referenced the “place-based hubs” (VCS) that had been set up. Within these, various different organisations drafted in to be involved and serve as a coordinated approach to supporting service-users. A participant from the local authority described these hubs and how they were brought about:

“Local authorities nationwide were given a statutory duty in March around ensuring that residents had access to food and medication, but clearly that evolved then, because we were dealing with people in crisis into supporting people into help, whether it was around mental health or around benefits or whatever. So, what we did in Oldham and I think probably replicated elsewhere was repurpose part of our call centre capacity away from taking reports around potholes and fly tipping to people calling in need of support... what that created though was, we had a helpline and a lot of people in need, whether or not that need was directly, tangentially or not at all attributable to Covid. So, when I say setting up a new front door, literally new phone number, phone this number if you’re struggling because of the current situation.” (LA)

These hubs were felt to be a particularly valuable resource for directly supporting the new group of clients who had not experienced seeking-support before, and meant that professionals were able to easily direct them to the “right places that they need to go” (LA) for appropriate support:

“On the Covid-19 helpline we provide support and food and do, bit of a discussion with the people who come through on the line to see if it isn’t just

food and essential supplies they need, what else we can actually provide them with, or deflect them to, as in other support services, financial support services, mental health support services.” (LA)

Furthermore, they were also felt to be useful for clients experiencing long-term difficulties who may have “*fallen through the gaps*” (LA) in previous thresholds, who could now access support through this new way of working. For participants working in the local authority, this service was perceived to really open their eyes to the “*large numbers of people in Oldham who almost are living from one week to another*” (LA).

Whilst there had been progress in terms of multi-agency working, participants noted that “*there needs to be more*” (VCS). Thus, in looking towards the future participants wanted multi-agency working to continue to grow in order to address service-users’ needs, which were also thought to continue to increase as time elapses and the pandemic and economic down-turn continues:

“The emerging need now is going to be redundancies, people losing their jobs. We haven’t even seen that yet but it’s going to come....They could lose properties, not pay the mortgage, so there’s all the fallout from that, and it’s going to be quite scary.” (VCS)

“I think there’s something about the recovery timetable, so people impacted now can’t recover economically and their issues won’t go away overnight, so somebody’s crisis is going to take quite a while to get over, whereas before we were able to nip some of those things much earlier, but no work, no money, greater debt, it’s going to take a long time to recover.” (LA)

Whilst professionals expressed worry for service-users’ growing needs, these worries were also viewed in the simultaneous context of VCS organisations being worried about their future and if they would be re-commissioned or continue to receive funding to continue their vital work.

5. Conclusion

This mixed-methods research has shed light on the views of local authority staff, VCS professionals, and service-users regarding defining, accessing, and engaging with crisis support organisations in Oldham.

Participants generally described crisis points as those that required immediate help to address service-users most pressing needs, whether that be sustenance or housing. However, definitions of crisis varied between different individuals, different organisations, and between sectors (local authority and VCS). Participants described viewing crisis and crisis support on a spectrum of need, with VCS organisations addressing needs at the lower-level of that continuum and the local authority intervening for higher-end needs. Therefore, there were different views about definitions and nature of crises support between statutory and non-statutory bodies.

These definitions inevitably impacted upon service-users' ability to access and engage with crisis support organisations, and participants described a number of barriers to access. These focused on the ratio between demand and capacity within Oldham, where demand was seen as exceeding the available capacity within the system. In particular, there were particular access-related barriers for specific groups of service-users, specifically single-adults, and those with no recourse to public funds. In addition to organisational-level barriers, there were also individual factors; service-users were more likely to approach services that they were familiar with for help, such as schools. However, this plays into the suggestion that services were generally easier to access for families who had existing links with schools. Lastly, participants spoke of perceptions of help-seeking, where some individuals simply did not see themselves as in crisis or worthy of the support that was available locally.

Upon accessing and engaging with crisis support organisations, staff were passionate about addressing service-users' underlying and holistic needs through a coordinated approach to crisis support in Oldham. Whilst all agreed in the value of this way of working, the practicality of multi-agency working to support this aim was questioned. Whilst there were some positive examples of organisations working in a coordinated way, for the most part, participants perceived there to be disjointed and silo working in Oldham. Similar to general access to crisis support, this was attributed to demand, capacity of organisations, and the number/breadth of organisations operating, which created gaps in support needs. Consequently, organisations often felt that they received inappropriate referrals, where they were not able to offer support for individuals. This also linked into the tensions around the different definitions offered

by LA and VCS participants, where participants from VCS organisations felt like they received referrals beyond their remit, where service-users had complex needs that warranted statutory involvement. Despite the challenges, all participants were committed to increasing and extending the coordination of services working within Oldham, in the best interests of service-users.

Lastly, participants spoke of the impact that Covid-19 has had, and continues to have, on service-users and crisis support provision. Consistent with the survey showing an increase in service-users, participants in Oldham described a new group of service-users who may not have been in crisis before or had to navigate crisis support processes, also suggesting a change in the profile of service users. Despite an increase in demand from a new group of service-users, some services both adapted to the new situation, whilst others had restricted their access; resulting in a varying picture of service provision. However, participants across both local authority and VCS organisations described the benefit of an increase in multiagency working, primarily through the support hub telephone lines that had been set up for local residents. Whilst there were some advantages to come out of Covid-19, participants expressed real concern for some groups during lockdown and for everyone experiencing, or on the brink of crisis, in the long-run.

6. Appendices

Appendix A: Survey

Emergency Financial Crisis Support - Oldham

The Coordinated Community Support Programme is a partnership between The Children's Society, Local Government Association, Trussell Trust, the Church of England, Lloyds Bank Foundation for England and Wales, and BBC Children in Need. We are working in partnership with four local authority areas across England and Wales to pilot a coordinated community support programme to better coordinate provision of emergency financial crisis support within local areas.

We have designed this survey to better understand emergency financial support in Oldham.. The survey will ask about your organisation, the type of emergency financial support offered, geographical areas of work, the number of clients you support, and perceptions about support in the local area.

This survey is for any organisation working in the Oldham area who self-identifies as providing emergency crisis support to local residents.

The questionnaire should take no longer than 10-15 minutes to complete.

Your responses will remain confidential and will be analysed as a group to better understand local provision. The data from this survey will be shared with our external evaluators, Cloud Chamber, and the information will be used to inform a local report which will be published by The Children's Society in early 2021.

If you have any questions, or if you wish to withdraw your data before publication, please get in touch with Isabelle Rothstein from the Coordinated Community Support Team at The Children's Society:
Isabelle.Rothstein@childrenssociety.org.uk

1. The nature and purpose of the research has been explained and I agree to complete this survey. I understand that I am free to stop at any time.

- Yes, I agree to take part
- No, I do not agree to take part

2. Does your organisation provide emergency financial crisis support in Oldham?

- Yes
- No

3. What is the name of your organisation?

4. How long has your organisation been operational? Please select one.

- Under 6 months
- 6 months – 1 year
- 1 year – 2 years
- 2 years – 5 years
- 5 years – 10 years
- 10 years +
- I don't know

5. In Oldham, which area(s) do you work in? Please select all that apply.

- We work nationally
- We work across the whole local authority
- Alexandra
- Chadderton Central
- Chadderton North
- Chadderton South
- Coldhurst
- Crompton
- Failsworth West
- Failsworth East
- Holinwood
- Medlock Vale
- Royton North
- Royton South
- Saddleworth North
- Saddleworth South
- Saddleworth West and Lees
- Shaw
- St. James'
- St. May's
- Waterhead

- Werneth
- None of the above

6. What help does your organisation provide for those in need of emergency financial support? Please select all that apply.

- Advice and/or Information
- Clothing & Children's essentials
- Domestic violence support
- Food or food vouchers
- Fuel top up
- Furniture
- Monetary
- White good
- Other: please specify

7. What type of advice do you provide to those in need of emergency financial support? Please select all that apply.

- Debt advice
- Housing related advice
- Legal advice
- Specialist Immigration advice
- Welfare rights advice
- Supporting applications for Local Welfare Assistance or other emergency grants
- Other: please specify

8. How many people has your organisation supported since January 2020? Please provide an estimate if you are unsure. Alternatively, you can click "save and continue" to answer the question at a later time.

9. Of the service users that you have supported this year, what proportion of service-users have accessed the following different types of support? Please provide your best estimate. If your organisation does not offer one or more type(s) of crisis support, please select Not Applicable.

	N/a	0-20%	20-40%	40-60%	60-80%	80-100%
Clothing & Children's essentials	•	•	•	•	•	•
Domestic violence support	•	•	•	•	•	•
Food or food vouchers	•	•	•	•	•	•
Fuel top up	•	•	•	•	•	•
Furniture	•	•	•	•	•	•
Monetary	•	•	•	•	•	•
White goods	•	•	•	•	•	•
Other	•	•	•	•	•	•

10. Of the service users that you have supported this year, what proportion of service-users have accessed the following different types of advice? Please provide your best estimate. If your organisation does not offer one or more type(s) of advice, please select Not Applicable.

	N/a	0-20%	20-40%	40-60%	60-80%	80-100%
Debt advice	•	•	•	•	•	•
Housing related advice	•	•	•	•	•	•
Legal advice	•	•	•	•	•	•
Specialist Immigration advice	•	•	•	•	•	•
Welfare rights advice	•	•	•	•	•	•
Supporting applications for Local Welfare	•	•	•	•	•	•
Other	•	•	•	•	•	•

11. In comparison to January-September 2019, how has the number of clients that you have supported this year (Jan - September 2020) changed? Please select one.

- Significant increase
- Slight increase
- No change
- Slight decrease
- Significant decrease

Please use this space to elaborate on any further context for the change that may be specific to your location or organisation.

12. As a part of this research project, we are undertaking interviews with local VCS organisations to further explore access to crisis support, and resources to address underlying needs. If you or a colleague would be interested in participating in a focus group interview, please provide contact details below and a member of the team will be in touch. Please note that your contact details will be kept separate from your responses to the survey.

Appendix B: Topic guide for professionals (LA and VCS)

Focus Group Guide

Section One: Introductions and Background information

- Can you give me a brief overview of your organisation and your role within that?
 - What type of crisis support is offered?

Section Two: Perceptions of crisis support

- What is your assessment of need within the local area?
 - Any trends or patterns in needs? Concern for particular groups?
 - High demand for any particular resource? (e.g. white goods, digital, advice etc)?
 - Has this changed since COVID-19?
- How do you and your organisation define crisis support?
 - Sense that this is similar/different to other VCS organisations/LA?
 - Has this changed since COVID-19?

Section Three: Journey through crisis support

- Can you talk me through how you come into contact with clients/clients come into contact with you?
 - How could access to crisis support be improved?
 - What would need to be done to achieve this?
- What do your referral processes entail? (who is eligible, processes?)
 - Can service-users self-refer or referrals from others (if so, who?)
 - How could application/referral processes be simplified or streamlined?
 - What would need to be done to achieve this?
- How do you address and respond to clients' underlying needs?
 - Signposting and/or referrals between agencies (is do, who?)
 - How co-ordinated are these processes between organisations?
 - Information sharing? (and issues with this e.g. consent)

- How could holistic needs be better supported? (e.g. co-ordination)
 - What would need to be done to achieve this?
 - What sort of aftercare support is available? Does support extend beyond addressing immediate crisis?
 - How could aftercare be improved to better address need?
 - What would need to be done to achieve this?
 - What are you most proud of in service and what works well?
 - What challenges are there to providing crisis support? (funding?)
-

Section Four: Multi-agency working

- To what extent do you work with the LA or other VCS organisations to provide services?
 - What are the facilitators and barriers to multi-agency working?
 - How can organisations in the local area work together to better support people in crisis?
-

Section Fiver: Future thinking

- What impact, if any, has COVID-19, had on your work and your clients?
 - How do you see that changing in the next year?
 - How have you changed your delivery to reflect changing need since Covid-19?
 - Will any of these changes be maintained?
- What are the priorities for the future of your crisis support?
 - Any areas of innovation/improvement?
 - What are the barriers to these priorities?

Appendix C: Topic guide for service-users

Interview Guide for Service Users

Section One: Background information

- Can you tell me a bit about yourself? (general rapport building questions)
 - Where do you live?
 - Who do you live with?
-

Section Two: Perceptions of crisis support

- Before you were involved with [referring service], what did you know about crisis support?
 - Any expectations about what/how they would be able to help with?
-

Section Three: Journey through crisis support

We're conducting this project to better understand people's experiences through different crisis support organisations, so it would be really helpful if you could talk me through your journey.

- How did you first come into contact with the crisis support organisation?
 - Referral from organisation/self-referral/advertising?
 - What were your first impressions of the organisation?
 - What could have made this process easier/better?
- What were the application processes like?
 - *[If direct application to organisation]*
 - How did you apply? Phone/internet?
 - How long did this process take? How did you feel during this time?
 - What could have made this process easier/better?
 - *[If application made on behalf of service user to organisation]*
 - How involved were you in the application process?
 - What could have made this process easier/better?

- How did the organisation support you?
 - What type of support was provided?
 - How did you feel about the type/level of support?
 - To what extent did you feel that your needs were met?
 - What could have made this process easier/better?

- [if applicable] After you were provided with support from [organisation], did they offer any additional support (i.e. aftercare)?
 - Any outstanding needs?
 - Referred to other organisations?
 - Level of co-ordination between services?
 - Do they follow up?

Section Four: Future thinking

- Taking your experience as a whole, what do you feel went/worked well?

- Taking your experience as a whole, what went less well?
 - How could these aspects be improved?
 - Any advice for crisis support organisations?

Appendix D: Breakdown of service-user estimates from the survey

Approximate number of service-users supported for each service across all organisations who responded to the survey.

TOTAL no. service users	Clothing and essentials	Domestic violence support	Food or food vouchers	Fuel top up	Furniture	Monetary	White goods	Other
1000	100		900	100	100	300	100	
14			4	1	1		1	
160	48	80	144	80	48	48	16	144
200	20	60	100	60	140	140	20	180
250	25	25	75	25	25	25	25	
70					63			
70			63					
TOTAL	193	165	1286	266	377	513	162	324
Average	48	55	214	53	63	128	32	162

Approximate number of service-users supported for each advice/information type across all organisations who responded to the survey.

TOTAL no. service users	Debt advice	Housing related advice	Legal advice	Specialist Immigration advice	Welfare rights advice	Supporting applications for LWA other emergency grants	Other
1000	300	100			300	100	
14	13					1	
160	80	144	80	80	144	112	144
200		20		100	60	140	60
250	125	225			125	75	
70	21	21					
TOTAL	539	510	80	180	629	428	204
Average	108	102	80	90	157	86	102